## Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

27、李九年27年15月2日 - 14、 14、 14、

10768721

| ۱-                  | <del></del>  |  |   |                                       |                          |  |        |                                       |                        |                          |                         |   |
|---------------------|--|--|---|---------------------------------------|--------------------------|--|--------|---------------------------------------|------------------------|--------------------------|-------------------------|---|
|                     |  | CLAIMS AS FILED - PART (Column 1)            |   |                                       |                          |  |        | SMALL ENTITY TYPE                     |                        | OR                       | OTHER THAN SMALL ENTITY |   |
|                     | TOTAL CLAIM  | ALCLAIMS 30                                  |   | $\mathcal{C}$                         |                          |  | ].     | RATE                                  | FEE                    | 7                        | RATE                    | FEE                                     |
| 1                   | FOR  |  | NUMBER                                  | NUMBER FILED                          |                          | NUMBER EXTRA                                 |        | BASIC FE                              | E 385.00               | OR                       | BASIC FE                | 770.00                                  |
|                     | TOTAL CHARGE   | 30 m   | 30 minus 20=                            |                                       | * 10                     |  | X\$ 9= |                                       | OR                     | ·X\$18=                  | 186                     |   |
| INDEPENDENT CLAIMS  |  |  |   | 4 minus 3 =                           |                          | -  |        | X43=                                  |                        | OR                       | X86=                    | 86                                      |
| -                   | MULTIPLE DEPENDENT CLAIM PRESENT   |  |   |                                       |                          |  |        | +145=                                 |                        | ÓВ                       | +290=                   |   |
| *                   | If the difference in column 1 is less than zero, enter   |  |   |                                       | "0" <sub>:</sub> in (    | column 2                                     | . '    | TOTAL                                 |                        | OR                       | TOTAL                   | 1036                                    |
|                     | CLAIMS AS AMENDED - (Column 1)   |  |   |                                       | T II<br>nn 2) (Column 3) |  |        | SMALL                                 | ENTITY                 | or                       | OTHER<br>SMALL          |   |
| AMENDMENTA          |  | CLAIMS .<br>REMAINING<br>AFTER<br>AMENDMENT  | -                                       | HIGHE<br>NUMB<br>PREVIO<br>PAID F     | ST<br>ER<br>USLY         | PRESENT<br>EXTRA                             |        | RATE                                  | ADDI-<br>TIONAL<br>FEE |                          | RATE                    | ADDI-<br>TIONAL<br>FEE                  |
|                     | Total  | *  | Minus                                   | **                                    |                          | =  |        | X\$ 9=                                |                        | OR                       | X\$18=                  |   |
|                     | Independent  | *  | Minus                                   | ***                                   | <u> </u>                 | ~  |        | X43=                                  |                        | OR                       | X86=                    |   |
|                     | FIRST PRESENTATION OF MUI  |  | ULTIPLE DEI                             | CHPLE DEPENDENT                       |                          | <u>'                                    </u> |        | +145=                                 |                        | OR                       | +290=                   |   |
|                     | ٠.   |  |   |                                       |                          | ·<br>  | L<br>Á | TOTAL<br>DDIT. FEE                    |                        | OR                       | TOTAL<br>ADDIT. FEE     | · • · · · · · · · · · · · · · · · · · · |
| _                   |  | (Column 1)                                   | ,                                       | (Colum                                |                          | (Column 3)                                   |        |                                       |                        | _                        |                         |   |
| AMENDMENT B         |  | CLAIMS<br>REMAINING<br>. AFTER<br>AMENDMENT  | ·                                       | HIGHE<br>NUMBI<br>PREVIOL<br>PAID FI  | ER<br>JSLY :             | PRESENT<br>EXTRA                             |        | RATE                                  | ADDI-<br>TIONAL<br>FEE |                          | RATE                    | ADDI-<br>TIONAL<br>FEE                  |
|                     | Total  | .* .   | Minus                                   | 4-4                                   |                          | =  |        | X\$ 9=                                |                        | OR                       | X\$18=                  |   |
|                     | Independent  | *  | Minus                                   | **** ·                                | N 2444                   | =  |        | X43=                                  |                        | OR                       | X86=                    |   |
| L                   | THIST PHESE  | NTATION OF MU                                | THPLE DEP                               | ENDENIC                               | LAIM                     |  |        | +145=                                 |                        | OR                       | +290=                   |   |
| BEST AVAILABLE COPY |  |  |   |                                       |                          |  |        | TOTAL<br>DOIT, FEE                    |                        | L                        | TOTAL<br>DOIT, FEE      |   |
|                     | ·  | (Column 1)                                   | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | (Column                               | 12)                      | (Column 3)                                   | ,      | , , , , , , , , , , , , , , , , , , , |                        |                          |                         |   |
| AMENDMENT C         |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT    |   | HIGHES<br>NUMBE<br>PREVIOU<br>PAID FO | R<br>SLY                 | PRESENT<br>EXTRA                             |        |                                       | ADDI-<br>FIONAL<br>FEE |                          | RATE                    | ADDI-<br>TIONAL<br>FEE                  |
|                     | Total  | 4  | Minus                                   | 4-4.                                  |                          | ::   |        | X\$ 9 =                               |                        | OR                       | X\$18=                  |   |
| AME                 | Independent  | l  | Minus                                   | ige"                                  |                          |  |        | X43=                                  |                        | OF                       | X86=                    |   |
|                     | FIRST PRESE  | VITATION OF MU                               | LTIPLE DEPI                             | ENDENT C                              | LAIM                     |  |        | -145=                                 |                        | ļ                        | +290=                   |   |
| ** [                | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "0." |  |   |                                       |                          |  |        |                                       |                        | DR L<br>DR <sub>AD</sub> | TOTAL<br>OF FEE         |   |
|                     |  | itier Previously Paid<br>rei Previously Paid |   |                                       |                          |  |        | or, FEE L                             | priate box i           |                          |                         |   |